## CITY OF SANTA CLARA SPEAKER'S CARD

(To be used when there are more than 10 speakers per item)

Name: Stephen Hazel Date: 5-9-06 (Please Print)					
Residence Address:(Optional)					
City:Zip					
Phone No.: (Home) (Work)					
Email:					
I represent:					
I wish to speak: FOR AGAINST Agenda Item No. 4F					
[See Reverse Side for Instructions]					
CITY OF SANTA CLARA  SPEAKER'S CARD  (To be used when there are more than 10 speakers per item)					
Name: HARRY ADAMS Date: 5/9/06 (Please Print)					
Residence Address: 143 South Claremonthe (Optional)					
City: <u>San Jose</u> <u>Zip 95/27</u>					
Phone No.: (Home) (Work)					
Email: horry, adams @ asm, ca. gov					
I represent: <u>Assemblywarnan</u> Lieber					
· ///					
I wish to speak: FOR AGAINST Agenda Item No. 4/-					

## CITY OF SANTA CLARA SPEAKER'S CARD

(Used to assist in the correct spelling of names in the Minutes, as appropriate)

LANGER CHEETER SERVET ALQUES				
Name: KANSEN CHY ELAINE ALQUIST Date: (Please Print)				
Residence Address:(Optional)				
City:Zip				
Phone No. <u>HBB6-8318</u> (Home) (Work)  (optional) (optional)  Email: KANSEN, CHUE SEN, CA. GOV				
Email: KANSEN. CHUR SEN. CA. GOV				
represent:				
wish to speak: FOR X AGAINST Agenda Item No. 4F				
[See Reverse Side for Instructions]				
CITY OF SANTA CLARA				
SPEAKER'S CARD (Used to assist in the correct spelling of names in the Minutes, as appropriate)				
Name: Dung Winslow Tin Bell Date: 5/9/06 (Please Print)				
Residence Address: 70 W-Hedding (Optional)				
City: San Josa Zip Zip				
Phone No.: 299-5040 (Home) (Optional) (Work)				
Email: doug. Winslow & Gos Sccgovers				
represent: Supervison This Beatl wish to speak: FOR MAGAINST Agenda Item No. 4F				
wish to speak: FOR / AGAINST Agenda Item No. 4F				
[See Reverse Side for Instructions]				

## CITY OF SANTA CLARA SPEAKER'S CARD

(Used to assist in the correct spelling of names in the Minutes, as appropriate)

Name: PHAEORA EUG-LANKINS Date: 5/9				
(Please Print)				
Residence Address:(Optional)				
City: SAN JOSE Zip 95125				
Phone No.: (Home) (Work)				
Email:				
I represent: SOUTH BAY LABOR COUNCIL				
Wish to speak: FOR X AGAINST Agenda Item No. 4F   PUTING ON BALLOT [See Reverse Side for Instructions]				
CITY OF SANTA CLARA SPEAKER'S CARD				
(To be used when there are more than 10 speakers per item)				
Name: Ted Chamberlain Date 5/9/06 (Please Print)				
Residence Address: 986 Capitolo Way (Optional)				
City: Santa Clara Zip 9505/				
Phone No.: 408-241-0949 (Home) (Work)				
Phone No.: 408-241-0949 (Home) TWork)  I represent: self-water				
I wish to speak: FOR AGAINST X Agenda Item No. 40?				
[See Reverse Side for Instructions]				

## CITY OF SANTA CLARA SPEAKER'S CARD

(To be used when there are more than 10 speakers per item)

Name: Ketra Ol	nerlande	Date:	May	
Residence Address:	732 Viada	er Ct.	(Optional)	
City: <u>50</u>	1	Zip_ <i>96</i>	000	
Phone No.: <u>423-8</u>	220_(Home)_		(Work)	
l represent:				
l wish to speak: FOR _	AGAINST Z	Agenda Item	No	
(See Poyerse Side for Instructions)				